As Peter Orszag said when he was Director of the Congressional Budget Office:

Rising health care costs represent the single most important factor influencing the Federal Government's long-term fiscal balance.

He was right. Without reform, instead of working to reduce our national deficit and stabilize the Federal budget, we will see total health care spending nearly double to encompass one-fifth of our gross domestic product in less than 10 years. And the Congressional Budget Office projects entitlement spending will double by the year 2050

Without reform, millions of uninsured Americans will continue to suffer. A Harvard study found that every year in America, lack of health care coverage leads to about 45,000 deaths. People without health insurance have a 40-percent higher risk of death than those with private health insurance. You have a 40-percent higher chance of death if you don't have health insurance compared with those who do. That is 46 million Americans at risk today because they do not have health insurance. A recent Johns Hopkins study found that children without insurance have a 60-percent higher risk of death than those with private health insurance—a 60-percent higher risk of death than those with private health insurance.

Another recent Harvard study found that the risk of dying from car accidents and other traumatic injuries is 80 percent higher for those without insurance—80 percent higher. The risk of dying from car accidents and other traumatic injuries is 80 percent higher if you don't have health insurance. In American should die simply because they do not have health insurance.

So, Mr. President, we are at a cross-roads in history. We have a historic opportunity to enact meaningful health care reform that will work to stabilize our economy and provide quality, affordable health care coverage for millions of Americans. We are not the first to be here, but we have come further than ever before.

We laid the groundwork in the Finance Committee and the HELP Committee. We held many hearings and countless hours of meetings on health care reform. Each committee crafted meaningful legislation and held exhaustive markups where we incorporated amendments from both sides of the aisle. We produced balanced, meaningful legislation, and I am proud-I am very proud-of the work both committees accomplished. Now we have one health care plan before us in the Senate, two basic bills merged together. We have an opportunity to debate that plan and offer amendments to make it even better. Then we will be called upon to vote.

The health care of our Nation is depending on us. The health care of our economy is depending on us. History itself is depending on us to answer the call. I am confident we will. I am confident we will at long last answer the call of history. I am confident we will soon enact meaningful health care reform that will lower costs and bring quality, affordable coverage to millions of Americans.

The ACTING PRESIDENT pro tempore. The Senator from Wyoming.

Mr. ENZI. Mr. President, as I mentioned earlier following the unanimous consent requests the leader made—who then introduced Senator Mikulski so that she could do her amendment, which kept me from commenting on the unanimous consent requests he made—I have to say I think those unanimous consent requests would have to be put in the category of a stunt. Unanimous consent usually means the two leaders have gotten together and negotiated some kind of agreement that we would abide by during this time. There was no agreement on this. Yet they went ahead and did the unanimous consent request solely so they could get the objection.

Nobody here, I am sure, wants to use Social Security money for anything except Social Security. So the real key to the stunt was the second one, which is the net savings generated by the CLASS program. That is a long-term care program that wound up in the Health, Education, Labor, and Pensions Committee bill.

The flaw with that particular amendment was that it collected money for 10 years without spending any and then it wound up with a huge liability. So we put in a little provision that it had to be actuarially sound because, quite frankly, it is not very good accounting to collect \$70 billion in exchange for a \$2 billion—excuse me, \$2 trillion—I get the b's and the t's mixed up here, because we are talking about real money here—a \$2 trillion bill. That is how much we are going to have to pay out over the next 10 years to cover the \$70 billion we accept in payments for this new kind of insurance that would be provided. That kind of insurance is provided—it is provided in the private sector—but for considerably more than what they were providing for in the CLASS Act.

So that was to bring a little more attention to it, and I want to bring a little more attention to it because I want people to take a closer look at the way that winds up. It is a good idea that is not paid for, and it is not paid for in such a way that it winds up, once again, adding to the deficit but in some cagey ways.

As for having the amendments posted on the Web site before they are given, I hope the initial version is posted on the Web site by everybody before they do it. But one of the things that happens on this floor is that occasionally a good idea can be built on by somebody from the other side or even somebody from your own party, and when that happens you can modify the amendment. I am not sure that agreement

wouldn't have prohibited any modifications to amendments, which is kind of what we ran into in the Finance Committee when we were trying to do amendments.

So good ideas—they need a lot more work. And to just throw those out at the beginning and to have about 1½ minutes' notice that they are going to be thrown out—I just don't think that is the right way to go about this whole process.

I have been working on the Nation's broken health care system ever since I entered the Senate more than 12 years ago, and I had high hopes this would be the year the Democrats and the Republicans of the Senate would work together to provide health insurance to every American. I urged my colleagues to start with a blank piece of paper and develop a bipartisan bill that up to 80 Members of the Senate could support.

Unfortunately, the majority leadership had other ambitions, because the bill being debated today is a testament to a partisan ideological vision. It appears that the drafters of this bill took to heart the sentiments expressed by the Speaker of the House, who earlier this year said, "We won the election, we write the bills." And for a number of weeks, the majority leader closed his door and wrote this bill on his own terms without any input from many of his colleagues or anybody on this side of the aisle.

This is a deeply flawed bill that fails to address the real needs of the American people. Americans overwhelmingly want reforms that will help lower their health care costs. Instead, this bill will spend \$2.4 trillion when it is fully implemented and contains numerous provisions that will actually drive up the costs millions of Americans pay for their health care.

It is important to understand how we got here. At the beginning of this process, the majority staff of the HELP Committee decided they were going to draft a partisan bill based on the reforms that had recently been adopted in Massachusetts. Republicans were shut out of the process during the drafting of the HELP Committee bill. Rather than working to resolve the difficult issues, the drafters of the bill included over 200 separate instances where the bill gave the Secretary of Health and Human Services the authority to make important decisions about the types of health care plans millions of Americans can receive. Rather than confronting and debating these important policies—getting to the details, and the devil is always in the details—the majority empowered unelected government bureaucrats to make decisions that will affect the health care of every single American.

As a result of this partisan process, we were forced to file hundreds of amendments. The chairman and other Democratic members of the committee have repeatedly commented on the numerous amendments accepted by the majority during the markup. At the